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Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT Date Submitted: April 7, 2006 <i>(use as many sheets as necessary)</i>				Complete if Known <table border="1"> <tr> <td>Application Number</td> <td>Unassigned</td> </tr> <tr> <td>Filing Date</td> <td></td> </tr> <tr> <td>First Named Inventor</td> <td>Dominique Marechal</td> </tr> <tr> <td>Group Art Unit</td> <td>Unassigned 1655</td> </tr> <tr> <td>Examiner Name</td> <td>Unassigned Heather Anderson</td> </tr> <tr> <td>Attorney Docket Number</td> <td>065691-0438</td> </tr> </table>		Application Number	Unassigned	Filing Date		First Named Inventor	Dominique Marechal	Group Art Unit	Unassigned 1655	Examiner Name	Unassigned Heather Anderson	Attorney Docket Number	065691-0438
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